

Activity 10.6: Assessing Data Charts & Tables

TIPS FOR TRAINERS



Suggested Use

Use at the end of your presentation on *Assessing Data Quality and Usefulness*, following the presentation and discussion of data formats.



Time

About 75 minutes:

- 5 minutes to establish groups and explain the activity
- 25-30 minutes for small group discussion (allow more time for less experienced participants)
- 30-35 minutes for presentation and discussion in the full group
- 5 minutes to summarize lessons and implications



Materials

- Handout for Participants: Assessing Data Tables & Charts
- Easel pad paper, markers and tape

Note: Charts and table in the Handout for Participants are designed to be usable if copied in black and white, but they are much easier to understand and use if provided in color. Part of the purpose of this activity is to help participants see how features like color and contrast affect the user-friendliness of a chart or table.



Knowledge or Skill Development

Understanding of the importance of user-friendly data presentations, and practical strategies to make data tables and charts clear, understandable, and effective in presenting, summarizing, and highlighting findings to support sound decision making.

Directions

1. Before the training, review the table and charts for this activity and substitute other examples, such as local charts and tables, if you feel that will make the activity more relevant and useful for your PC/PB and EMA/TGA.
2. At the end of the presentation/discussion about data reports and formats, form small groups. You can do this by having participants “count off,” or you can assign them to groups by committee or topic area, so they review charts and tables that may relate to their responsibilities or interests. Be sure you have individuals with varying levels of data experience in each group.

3. Once participants are seated in their small groups, provide the handout with instructions, and explain the assignment. Assign a situation to each group. The group is to review its situation, individually review the assigned charts and/or tables, and then work together to assess their formats, clarity, and usefulness for the PC/PB situation specified, based on factors discussed in the presentation and their own experience. Encourage participants to look back at the slides with suggestions for preparing oral presentations and data charts. Note: It is fine to assign the same situation to more than one group.
4. Ask each group to begin by choosing a **facilitator** to coordinate discussion, a **recorder** to take notes and then summarize the work on easel pad paper for sharing, and a **reporter** to present a summary of the work of the small group to the full group. You may allow the same person to serve as recorder and reporter.
5. Tell the groups they have 25 minutes to review their assigned materials and answer the questions provided.
6. Check in with the groups after about 20 minutes and extend the time by 5 minutes if needed.
7. Now ask the reporter for each group to present its situation and assessment, while the assigned charts/tables are projected as PowerPoint slides. Ask for a 3-5-minute summary presentation, then ask other members of the same group if they have anything to add, and then open up discussion to the full group. If more than one group has the same situation, let both reporters present before opening up the discussion to other members of the small groups. Briefly summarize main points, then move to the next group and its situation.
8. Once all presentations have been made and discussed, ask the group what they learned from the activity that can be helpful in their work in the PC/PB.



Activity 10.6: Assessing Data Charts & Tables

HANDOUT FOR PARTICIPANTS

Instructions

1. 1. Work in a small group, choosing:
 - A facilitator to coordinate discussion
 - A recorder to take notes and then summarize the work on easel pad paper for sharing
 - A reporter to present a summary of your group’s work to the full group
2. Individually review their assigned situation and review the sample charts/tables assigned to your group, and then work together to answer the following questions:
 - a. What are the strengths of each data chart or table (and any accompanying summary text) as a way of presenting data for this PC/PB? Consider all the factors previously discussed—content, type of chart or table, colors and contrast, type size, etc.
 - b. What are the weaknesses, gaps, or limitations of each, and what could be done to improve them?
 - c. Which of these formats—as presented, or with some revisions—should the PC/PB consider using? If it should keep looking for better formats, what should it be looking for?
 - d. What, if any, ideas or lessons does this review offer for your PC/PB?
3. Help your reporter to be ready to present your situation and your charts/tables to the full group.

The Situation

Provided on the following pages; each situation has five data formats.

Situation A: Epi Data

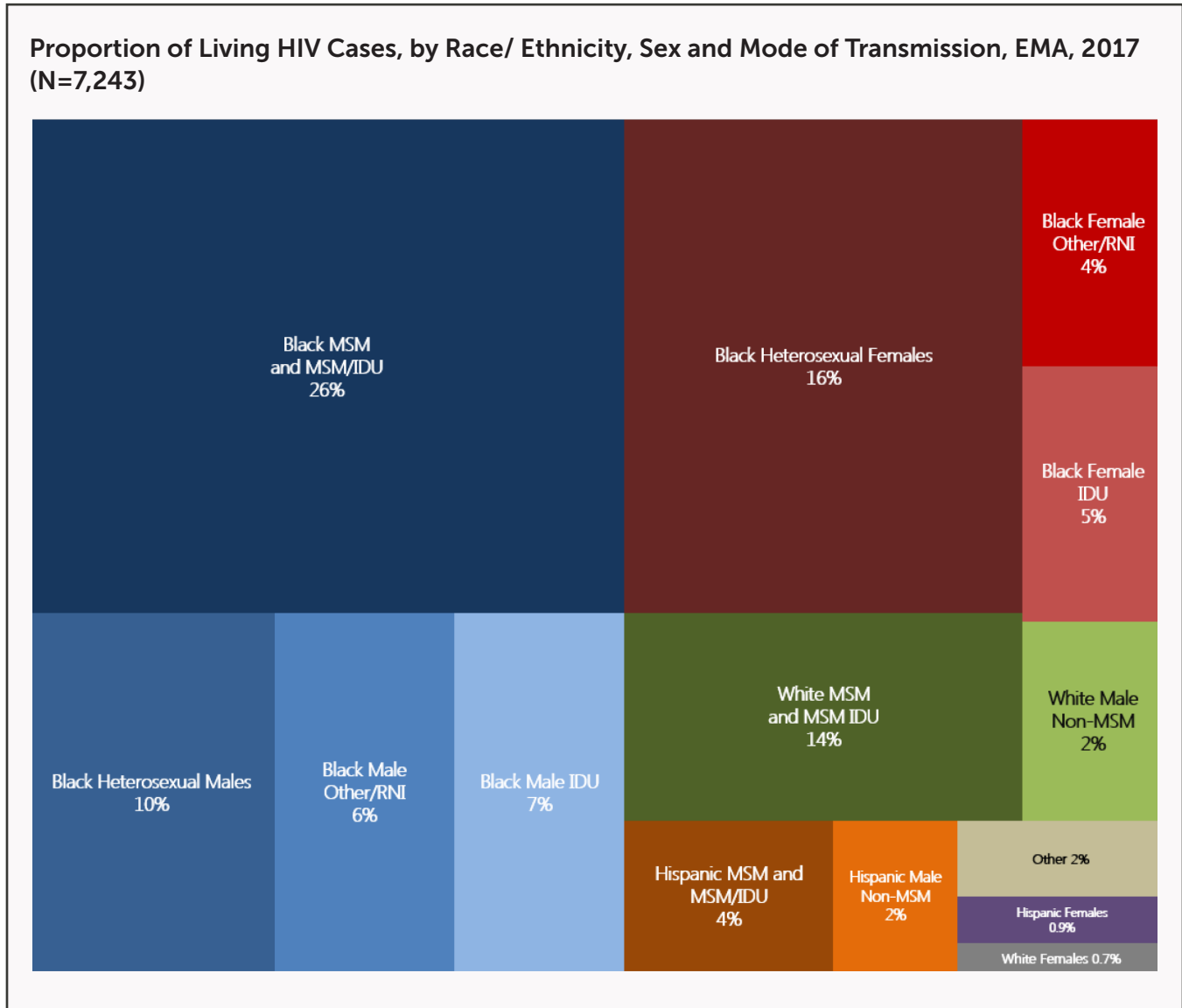
The committee responsible for the data presentations prior to priority setting and resource allocation is working with local surveillance staff to refine formats and approaches for presenting annual epi profile data. In the past, formats have changed a lot year to year, and many PC/PB members found some of the tables and charts difficult to understand. The PC/PB has asked for help in receiving data in clear and easily understandable formats so they can identify important findings and use them in planning and decision making. The idea is to develop ways of presenting data that can be used consistently for all epi presentations. Surveillance staff have offered several sample formats for presenting epi data, some they have developed and others from other EMAs/TGAs and states, so the committee can review them and decide which ones should be adopted or adapted for ongoing use.

Format #1: Table with important statistics highlighted.

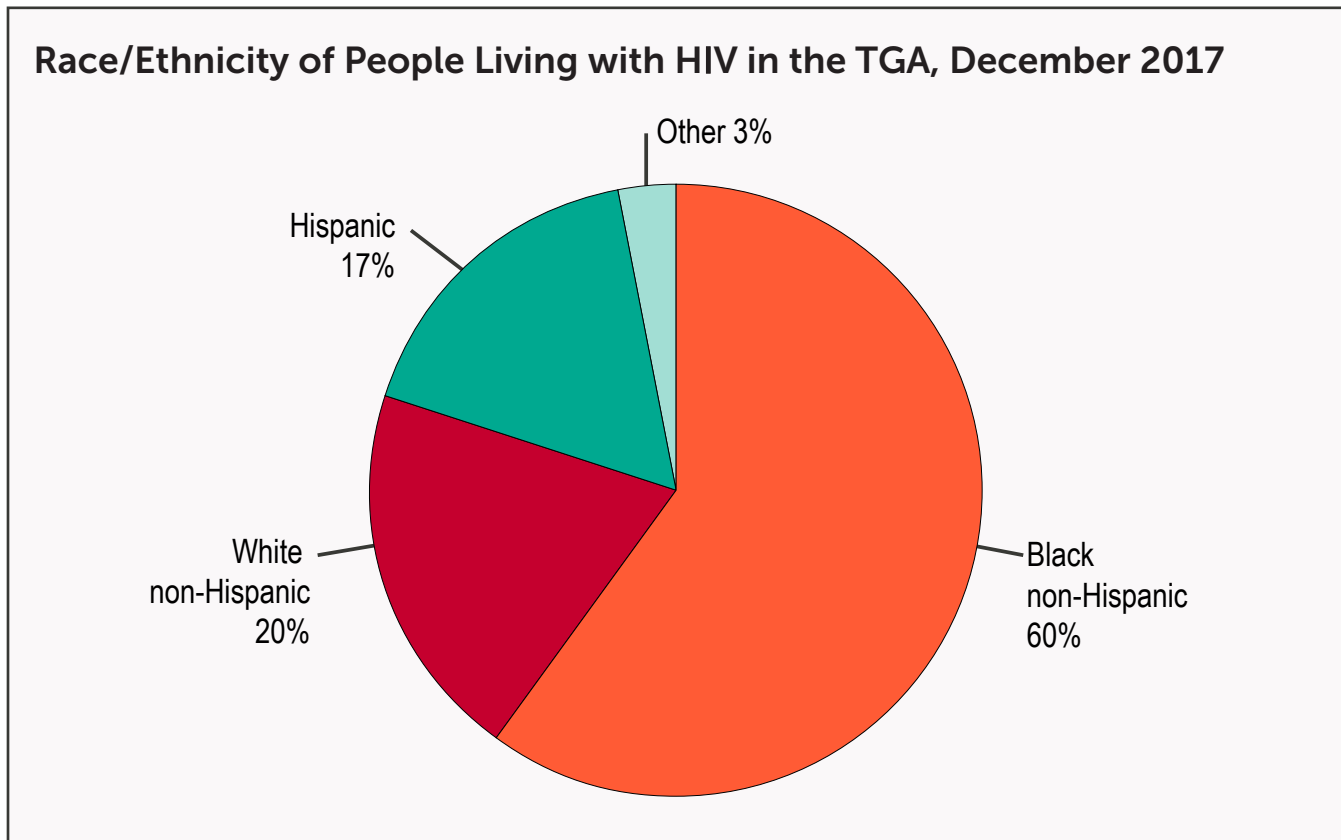
Race/Ethnicity of People Living with HIV in the EMA by Jurisdiction, 2017
N = 12,370

Race/Ethnicity	Central City/County N = 5,690	Suburban County #1 N = 3,831	Suburban County #2 N = 2,581	3 Rural Counties N = 258
Black, not Hispanic	65%	57%	35%	36%
White, not Hispanic	16%	22%	37%	61%
Hispanic	16%	7%	23%	2%
Asian/Pacific Islander	<1%	1%	4%	1%
Mixed Race/ Other/Unknown	2%	3%	1%	0%

Format #2: Box type chart showing a combination of race/ethnicity, gender, and mode of transmission in a single chart.



Format #3: Simple pie chart showing percent of all people living with HIV diseases by race/ethnicity.

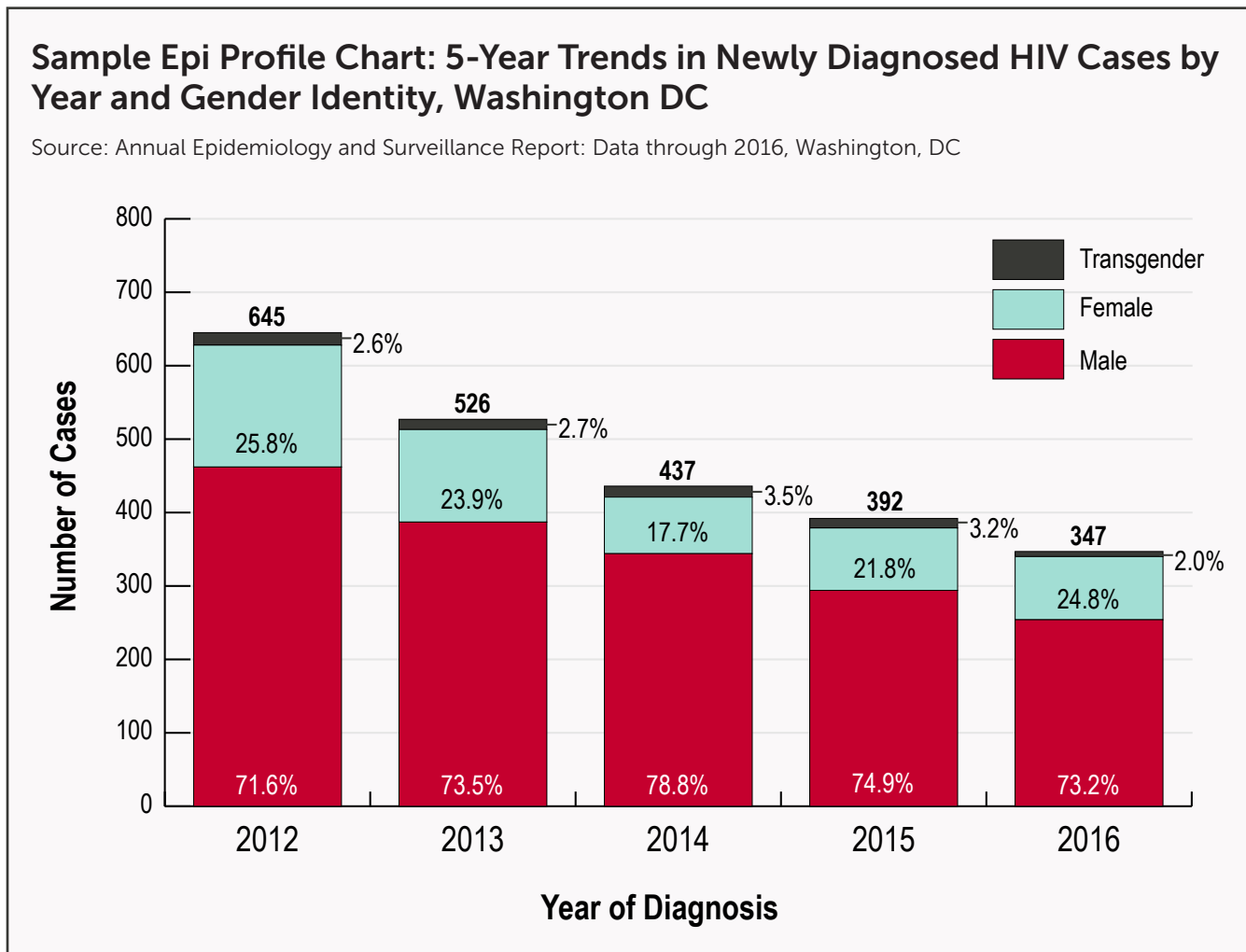


Format #4: Epidemiologic highlights in text format.

People Living with HIV Disease in the EMA in 2017

<p>A total of 5,828 people are living with HIV disease:</p> <ul style="list-style-type: none"> • 47% Black • 38% White • 12% Hispanic/Latino • 60% 30-49 years old • 49% MSM • 28% White MSM 	<p>Out of 10 people living with HIV disease, approximately:</p> <ul style="list-style-type: none"> • 5 are Black • 4 are White • 1 is Hispanic/Latino • 8 are male • 6 are 30-49 years old • 5 are MSM • 3 are White MSM
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Format #5: Trend chart with data labels showing percentages of newly diagnosed PLWH by year and by gender identity, plus the total number of PLWH newly diagnosed each year. May seem more complicated but can be used each year.



Situation B: Survey Findings

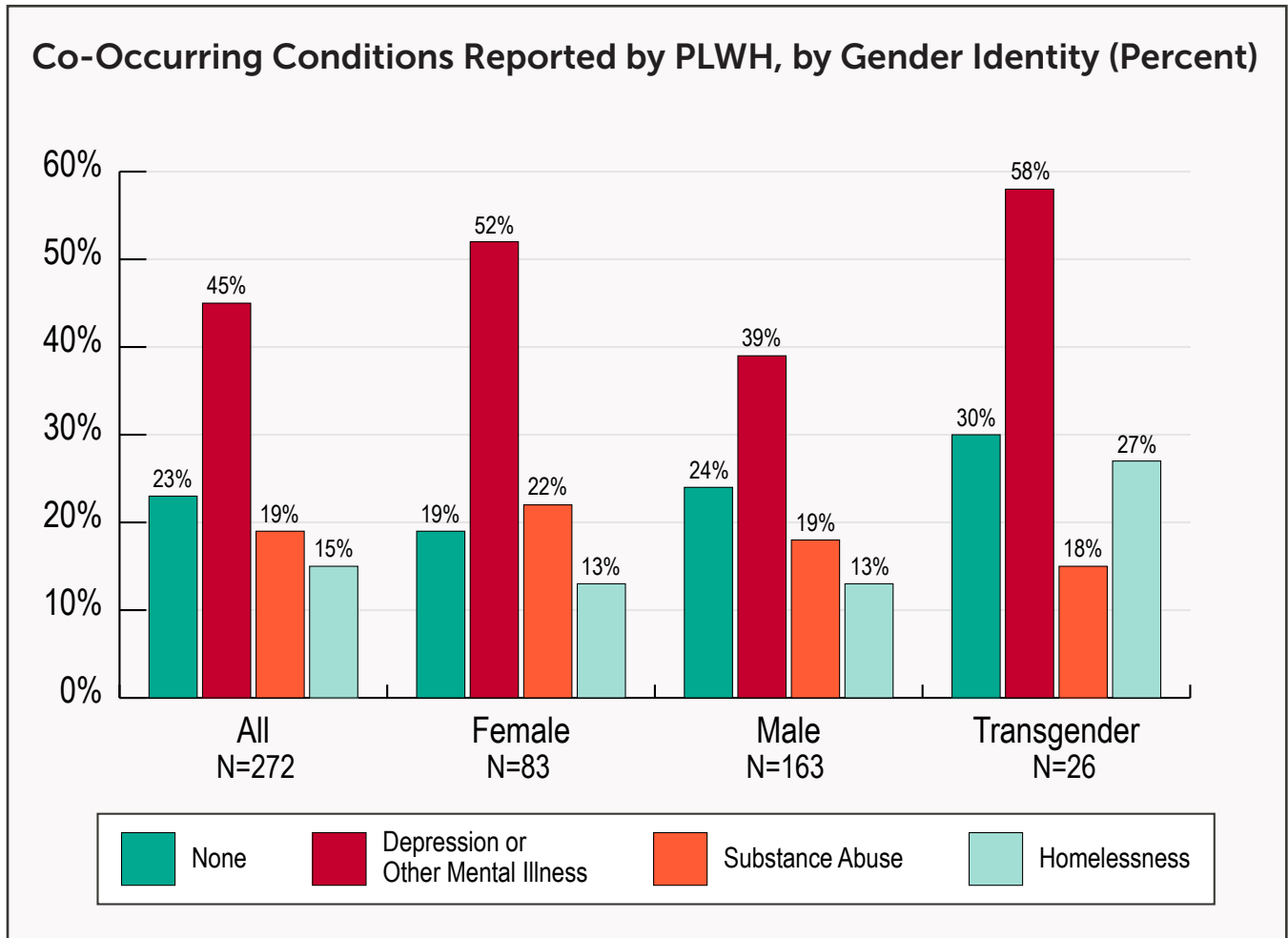
The Needs Assessment Committee is preparing its first presentation to the full PC/PB on key findings from its new PLWH survey, working with PC staff who are preparing the actual tables and charts. The PC/PB has decided it wants to receive findings in segments at several different meetings so it has time to understand and discuss them – and to encourage their year-round use for improving services. It wants to establish some common formats for presenting these data that can be used consistently for data from multiple sources, to increase user-friendliness and understanding of the data. The staff and leadership have been reviewing chart and table formats from past presentations and from other jurisdictions. They are going to present the first set of formats for committee review today.

Format #1: Narrative summary of survey data for a specific population (same format can be used for multiple populations)

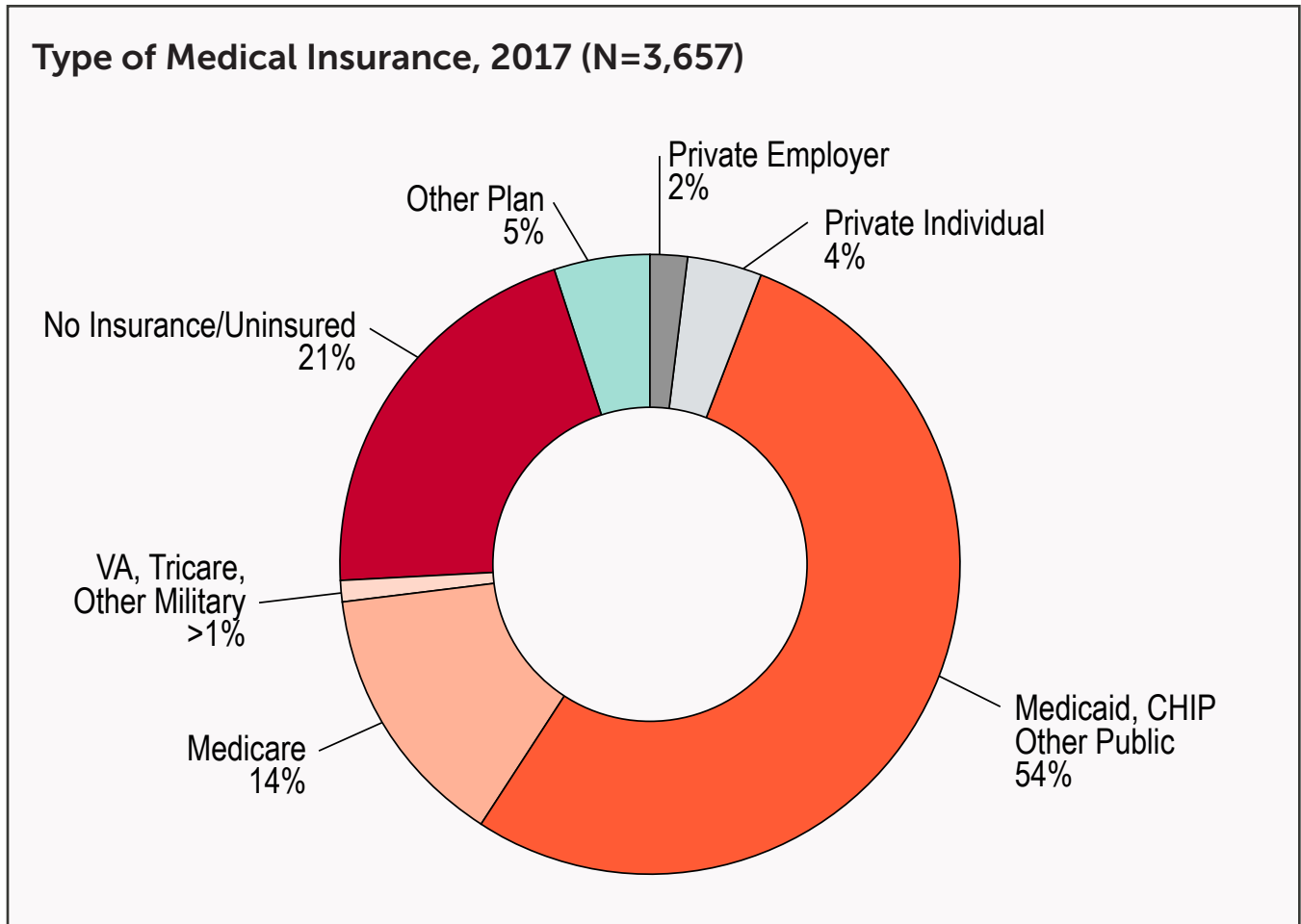
Mental Health & Psychosocial Services

- **Uses:** Mental health services are psychological and psychiatric treatment and counseling services offered to individuals with a diagnosed mental illness, conducted by a licensed mental health professional; psychosocial services include support & counseling services such as support groups that may be provided by peers or other non-licensed personnel (support service)
- **Need/gap:** 45% of consumers responding to the survey reported “depression or other mental health issues” in the past year; PLWH indicated a similar level of need for mental health services and “peer support/support groups”:
 - *63% of consumers surveyed reported a need for mental health services, 52% received such services over the prior year, and 11% of those who needed services did not receive them*
 - *60% reported a need for peer support/support groups, 46% received them, and 14% of those needing them did not; concern that some may soon end*
- **Satisfaction:** 72% of mental health clients and 65% of peer support/ support group clients were “very satisfied”; satisfaction with both services was somewhat higher in the central city than in other parts of the TGA

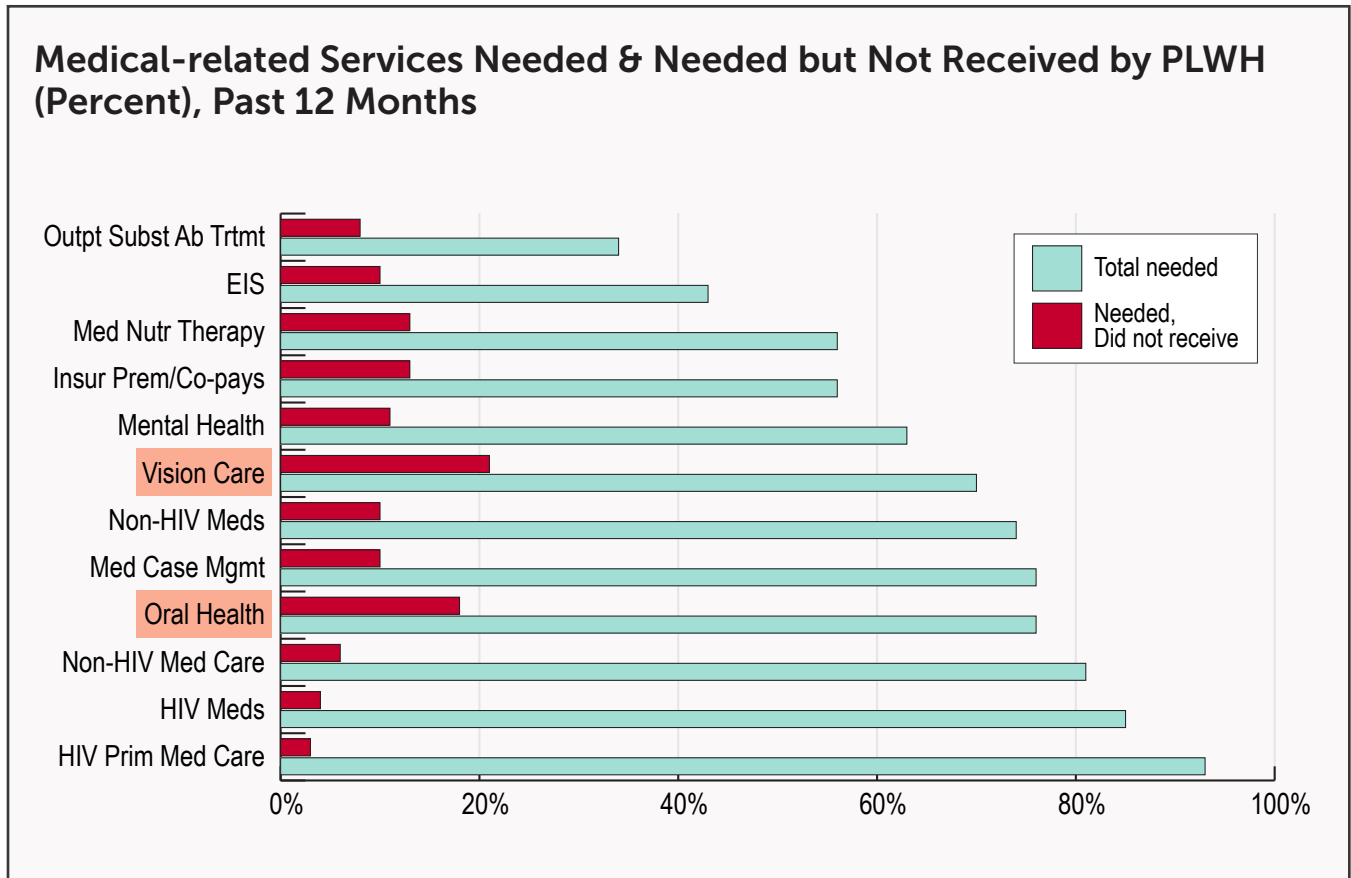
Format #2: “Clustered column” chart comparing reported life situations from a needs assessment survey by gender, with brief text to highlight key findings.



Format #3: "Sunburst" chart showing percent of clients with various types of public and private medical insurance coverage.



Format #4: "Clustered bar" chart on service gaps by service category using data from a PLWH survey.



Format 5: Table using rankings of services that most help PLWH stay in care; includes responses from a PLWH survey and a medical case manager survey.

Most Important Services to Help PLWH Stay in Care As Reported by PLWH & Medical Case Managers

Service	PLWH Ranking	PLWH (N=265)	MCM Ranking	MCM (N=20)
Case Management	1	216	1	19
Oral Health Services	2	144	9	9
EFA - Rental Assistance	3	123	7	12
EFA - Utilities	4	111	10	8
Medical care	5	104	2	18
Medications (ADAP)	6	103	3	17
Support Groups	7	73	6	13
Groceries/Hot Meals	8	70	11	8
Transportation	9	70	4	15
Mental Health Services	10	60	5	14

Situation C: Service Expenditure and Utilization Data

The committee responsible for the data presentations prior to priority setting and resource allocation is working with local surveillance staff to refine formats and approaches for presenting annual epi profile data. In the past, formats have changed a lot year to year, and many PC/PB members found some of the tables and charts difficult to understand. The PC/PB has asked for help in receiving data in clear and easily understandable formats so they can identify important findings and use them in planning and decision making. The idea is to develop ways of presenting data that can be used consistently for all epi presentations. Surveillance staff have offered several sample formats for presenting epi data, some they have developed and others from other EMAs/TGAs and states, so the committee can review them and decide which ones should be adopted or adapted for ongoing use.

Format #1: Table showing targeted and actual number of people using each funded service category.

Service Category	Target	Actual	% Attainment
OAHS	1,437	1,608	112%
Medical Case Management	1,064	2,098	197%
Oral Health	386	302	78%
Drug Assistance	339	486	143%
Substance Abuse Treatment	62	188	303%
Mental Health	326	906	278%
Medical Nutrition Therapy	137	126	92%
EFA - Food Vouchers	279	293	105%
Home Delivered Meals	215	198	92%
Medical Transportation	250	364	146%
Linguistic Services	210	212	101%
Professional Services - Legal	60	34	57%
Health Insurance Assistance	132	98	74%

Format #2: Table listing the ten funded service categories that served the most clients during the past year.

Most Used Service Categories, 2017

Rank	Service Category	Percentage
1	Outpatient Ambulatory Medical Care	79%
2	Medical Case Management	73%
3	Oral Health Care	29%
4	Medical Transportation	23%
5	Health Insurance Assistance	18%
6	Mental Health	17%
7	Food Bank/Home Delivered Meals	15%
8	Emergency Financial Assistance	14%
9	Medical Nutrition Therapy	8%
10	Substance Abuse Treatment	5%

Format #3: Summary of expenditures, number of clients served, and annual cost per client for support services, prepared for use in PSRA.

Expenditures, Clients Served, & Costs per Client for Support Services, 2017

Support Service Category	Expended	# Clients Served	Part A Cost per Client
Child Care	\$2,170	27	\$80
Emergency Financial Assistance	\$168,197	323	\$521
Food Bank/ Home Delivered Meals	\$215,252	337	\$639
Legal Services	\$68,066	30	\$2,269
Linguistic Services	\$14,376	73	\$197
Medical Transportation Services	\$38,676	805	\$48
Psychosocial Support Services	\$57,494	26	\$2,211
Non-Medical Case Management	\$286,328	348	\$823

Format #4: Tables showing the six most-used services for each of four special populations identified by the EMA/TGA based on concerns about clinical outcomes.

Most Used Services for Four Special Populations, 2017

MSM of Color (n=934)	#	%
Outpatient/Ambulatory Health Services	652	70%
Medical Case Management	594	64%
Oral Health Care	148	16%
Mental Health Services	132	14%
Medical Transportation	215	23%

Recently Diagnosed (n=397)	#	%
Outpatient/Ambulatory Health Services	266	67%
Medical Case Management	241	61%
Early Intervention Services	82	21%
Mental Health Services	60	15%
Medical Transportation	87	22%

Receiving Substance Abuse Treatment Services (n=354)	#	%
Outpatient/Ambulatory Health Services	326	92%
Medical Case Management	259	73%
Mental Health Services	195	55%
Oral Health Care	99	28%
Medical Transportation	326	92%

Latina (n=98)	#	%
Medical Case Management	74	76%
Outpatient Ambulatory Health Services	65	66%
Outreach	18	18%
Food Bank/Home Del Meals	17	17%
Medical Transportation	16	16%

Framework #5: Bar chart showing the percent of core medical service funds expended, overall and by service category.

